Information for Students

During your Elective Period, you have the opportunity to witness illness and disease in a different context to that which is familiar to you, including in the UK. You are expected to use the Elective Period as an opportunity to reflect on your professional development and the wider issues regarding global health.

During the four weeks of ‘Preparing for Professional Practice’, you will spend two weeks in the Medical School on a range of activities including a group presentation on one of five global health topics. Note the topic allocated to you and think about its issues during your Elective Period. The issues we have listed are just a few examples and you will be able to find others of equal importance during your Elective Period. Each group will be composed of students who have spent their Elective Period in very different parts of the world. Between you, you will have direct experience of many issues for health care in high, middle and low income countries.

Presentations

You will present on your allocated topic to the other groups in your room and a member of staff. The time for the presentation will be limited to 20 minutes with 10 minutes for questions and comments. You will be given feedback on the content and style of the presentation.

Guidance

1. The presentation should demonstrate your group has appreciated the global dimensions of the topic.
2. View the Expert Interview which provides context for the topic and triggers to help your discussions.
3. You should **debate together** the issues, bringing the different perspectives you have gained from observations during your Elective Period as the first step.
4. When you have decided the key points that you will be making in the presentation, divide up the task of preparing any audio-visual material you want to use.
5. There is no pre-determined limit to the number of PowerPoint slides you can use but attempting to show more than one per minute usually results in either running over time or being hurried in the presentation.
6. A PowerPoint slide should contain no more than six important points.
7. It is not necessary for every member of the group to stand up and talk, although all of you should be available to answer any questions or respond to the discussion.
8. If you have pictures or video clips taken during your Elective Period, that can be used to illustrate the points you are making, ensure you have appropriate consent from individuals in the pictures or video clips. If you include pictures of colleagues taken in a private place than verbal consent is sufficient. Using pictures of patients requires written consent.
9. In UK law, pictures taken in public places do not require consent but be aware this may not be the case in other countries.

10. Before giving the presentation the group should meet to rehearse so you can correct any errors or ambiguities and also to ensure it will fit into the 20 minutes available. One of the members of staff will ‘chair’ the session and stop you if you over-run your time limit.

11. You may feel it is necessary to talk about sensitive issues for individuals or organisations during your presentation. The audience should treat these as confidential communications and not discuss them outside of the session.
Household Energy: Accessibility and Affordability

1. **Context**

As the population of the world grows and expectations for living standards rise, obtaining energy to power homes will become an increasingly important issue for healthcare. For most people living in resource rich settings we take it for granted our homes will have energy. In many parts of the world power cuts are a daily reality. Paying household bills is a concern, even for people in the UK who do not consider that they are poor. How do the patients and healthcare staff you meet on your Elective Period manage the points listed? Are there other issues important to consider?

2. **Issues for Resource Poor Settings**

- What are the health effects from burning biomass fuels (wood, charcoal, animal dung) to cook food and heat homes?
- What impact does collecting the fuel have on the local environment?
- Why are the alternatives of electricity and gas not more widely used?
- How is food kept safe for consumption after it has been bought?
- Do more sustainable means of energy production offer any solutions?
- For what purposes do people living ‘off the grid’ most want to use electricity?

3. **Issues for Resource Rich Settings**

- Is hypothermia amongst the elderly becoming more or less prevalent?
- Do heat waves produce more illness and death?
- Is the concept of ‘fuel poverty’ helpful in tackling the problem?
- How much resource is used to provide energy security in healthcare buildings?
- Do more sustainable means of energy production offer any solutions?
- What will be the health effects if the security of the electric grid becomes less reliable and the UK experiences repeated power cuts?

4. **Predictions for the Next Decade**

You should think about the future consequences of this topic over the next decade for patients, doctors and the healthcare systems in which they work. How can the expected negative effects best be mitigated in the setting experienced during your Elective Period?
Water: Too Much or Too Little?

1. Context

One of the predicted effects of climate change from global warming is a re-distribution of rainfall so that areas which need more rain get less and areas which have sufficient rain get too much unpredictable rain, leading to floods. In England, Cumbria is often affected by floods whilst there is a concomitant water-shortage persisting in Kent. Recurrent drought affects many resource poor countries and resulting in low levels of food security. In the UK water is so cheap we effectively regard it as free but in some countries people have to queue, pay for and carry home their water supplies. How do the patients and healthcare staff you meet on your Elective Period manage the issues listed? Are there are other issues important to consider?

2. Issues for Resource Poor Settings

- How available is drinking water?
- What is the quality of the drinking water? Can you obtain a report stating the quality of the water? If so, do you believe it?
- Does the quality of the drinking water affect health? If so, how does it do so?
- How does water affect the social and economic wellbeing of the community?
- Will the supply of water become a source of conflict within or between countries in the near future?
- How much time do people spend obtaining water for their essential needs?

3. Issues for Resource Rich Settings

- When was the last time there were any restrictions placed on the use of water?
- What are the consequences for population health of restrictions in supply?
- What is the quality of the drinking water? Can you obtain a report stating the quality of the water? If so, do you believe it?
- What aspects of the quality of the drinking water are people concerned about? If none, has fluoridation been introduced? If not, why not?
- What contingency plans are there in the event of a flood of the healthcare facility where you are spending your Elective Period?
- How would the healthcare facility manage if there were to be cuts in the supply of water?

4. Predictions for the Next Decade

You should think about the future consequences of this topic over the next decade for patients, doctors and the healthcare systems in which they work. How can the expected negative effects best be mitigated in the setting experienced during your Elective Period?
Quality of health care: Who is responsible for ensuring it is good?

1. Context

The experience of patients in Mid Staffordshire has shaken our confidence in the NHS delivering uniform quality of care to all. The Francis Report makes pages of recommendations about how to prevent a similar situation in the future. A key message is that doctors and nurses must speak out when care is poor and robust mechanism should guarantee patients have their complaints heard. In any setting the performance of healthcare staff is the key to delivering the best possible care. However, in all health economies resources are seen to be insufficient to meet needs so prioritising the needs of one group over others is often a factor affecting quality. How do the patients and healthcare staff you meet on your Elective Period manage the issues listed? Are there are other issues important to consider?

2. Issues for Resource Poor Settings

- Do the patients you meet have opinions about the quality of the care they are receiving?
- Are there mechanisms patients can use to complain about poor care?
- Did you observe examples of unsafe practice? If so what actions did you consider taking?
- You will have seen variations in the competence of health workers you observed. How would a person responsible for the service recognise and act on unacceptable performance?
- Did you see examples of training of healthcare staff aiming to improve patient safety?
- Were the staff aware of limited resources in their setting and did they believe that this limited their ability to deliver high quality care?

3. Issues for Resource Rich Settings

- The questions are the same as for resource poor settings!

4. Predictions for the Next Decade

You should think about the future consequences of this topic over the next decade for patients, doctors and the healthcare systems in which they work. How can the expected negative effects best be mitigated in the setting experienced during your Elective Period?
Access to health care: Gift, service or commodity?

1. Context

The NHS in the UK is a state-funded, universal, comprehensive healthcare system providing care predominantly free at the point of delivery. Critics claim that this means patients are passive, having to accept what is provided. Supporters argue that the health care is a gift from society to those in need. It is not an ‘entitlement’ for tax payers as those most in need are usually too poor to pay much tax. In other systems patients or their employers pay an annual amount into an organisation and in return receive a service. This form of provision is often termed social insurance. The third method is direct payment by patients in return for health care at the time that it is given. How do the patients and healthcare staff you meet on your Elective Period manage the issues listed? Are there are other issues important to consider?

2. Issues for Resource Poor Settings

- How does wealth influence access to healthcare?
- Do patients who pay have greater influence over the options available to them regarding their treatment?
- Do examples of all three forms of provision co-exist in the place where you spent your Elective Period?
- Do the patients you meet have to make decisions to balance the cost of health care against other vital needs such as buying food?
- To what extent is the healthcare dependent on Western medicine supplies?
- What is the proportion of healthcare resources devoted to prevention compared with treatment?

3. Issues for Resource Rich Settings

- Are there unmet healthcare needs of the local population? If so, can you describe and quantify them?
- Do examples of all three forms of provision co-exist in the place where you spent your Elective Period?
- Is access to and affordability of health care a key political issue in the country where you spent your Elective Period?
- Does the local health economy deliver equitable access to health care for all?
- What is the proportion of healthcare resources devoted to prevention compared with treatment?
- Who makes decisions about rationing health care?

4. Predictions for the Next Decade

You should think about the future consequences of this topic over the next decade for patients, doctors and the healthcare systems in which they work. How can the expected negative effects best be mitigated in the setting experienced during your Elective Period?
Health Worker Migration: Rights and Responsibilities

1. Context

Health worker migration operates in two directions. When qualified staff in resource poor countries migrate to resource rich countries this loss of a vital national asset can be as damaging as the loss of raw materials such as minerals or timber. They can be ‘pulled’ in by higher wages or better work opportunities or ‘pushed’ out by lack of job opportunities, conflict or frustration about not being able to deliver good care. The NHS (and most other healthcare systems in the developed world) is dependent on doctors and nurses educated elsewhere – in both resource rich and poor settings. Without their contribution the service would collapse but the case of the German out-of-hours doctor who killed a patient by giving the wrong dose of morphine is an illustration of potential problems. How do the patients and healthcare staff you meet on your Elective Period manage the issues listed? Are there are other issues important to consider?

2. Issues for Resource Poor Settings

- Is there a shortage of qualified staff in the healthcare system where you spent your Elective Period? If so, what skills is there a shortage of?
- Could skills shortages be addressed in ways other than have more qualified staff?
- Is there a role for Western trained healthcare staff? If so, what is their unique role that differs from what local staff could provide?
- What proportion of trained doctors, nurses and allied health professionals emigrate?
- Does the country train too few or too many doctors, nurses and allied health professionals for its healthcare system?
- How does the country pay the salaries of the health professional who provide care?

3. Issues for Resource Rich Settings

- Is there a shortage of qualified staff? If so, what skills is there a shortage of? Could such a shortage be addressed in ways other than have more qualified staff?
- Is there a role for healthcare staff from different healthcare traditions? If so, what is their unique role that differs from what local staff could provide?
- Does the UK attempt to limit unethical recruitment of health professionals from resource poor settings?
- What proportion of trained doctors, nurses and allied health professionals are from outside the country you are spending your Elective Period in?
- Are there perceptions that their education and training in a different country means they are not as competent as locally trained staff?
- Where do the incoming health workers see their future in five years’ time?

4. Predictions for the Next Decade

You should think about the future consequences of this topic over the next decade for patients, doctors and the healthcare systems in which they work. How can the expected negative effects best be mitigated in the setting experienced during your Elective Period?